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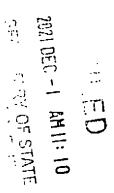
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A. RIVERS
DEC 1 3 2021



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12/01/21--01000--014 **25.00



COVER LETTER

Division of Co	prporations	
SUBJECT:	Screamer Construction UC Name of Limited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are submitted for filing.	
Please return all corresp	condence concerning this matter to the following:	
	Stanley Creamer Name of Person	
	Screamer Construction LC	
	1466 Penny RD Address	
	Cottonlale FL 32431 City/State and Zip Code	
	Screener LLC @ anal.com E-mail address: (to be used for future annual report notification)	
For further information	concerning this matter, please call:	
_Stanley	of Person at (850), 5)3-2904 Area Code Daytime Telephone Number	
Enclosed is a check for	the following amount:	
rec و numg rec	Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	

Maning Audress.

IO:

Registration Section

Registration Section Division of Corporations P.O. Box 6327

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Su cet Auuress.

Registration Section Division of Corporations The Centre of Tallahassee

LTTD 13, MOINOC DUCCE, DUING OTO Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Syemer	- Co	nstruc	tion	(40)			
(Name of the Limited Liab (A Flori	pility Compan rida Limited Li	y as it now appea ability Company)					
The Articles of Organization for this Limited Liability Florida document number \(\(\times\)210000598		vere filed on	of on h	- 202 Odda	and as.	signed	
This amendment is submitted to amend the following:							
A. If amending name, enter the new name of the li	mited liabil	ity company h	<u>iere</u> :				
The new name must be distinguishable and contain the words "L	imited Liabilit	y Company," the	designation "I	.LC" or the abl	previation "L	L.C."	
Enter new principal offices address, if applicable:				- 			
(Principal office address MUST BE A STREET ADI	DRESS)						
Enter new mailing address, if applicable:							
(Mailing address MAY BE A POST OFFICE BOX)							
							
D. It amending the registered agent and/or register agent and/or the new registered office address here		१प। ८५५ छ।। छवा	i ecot as' <u>cu</u>	<u>त्त</u> क्षेट्र सब्द्राक्ष	e or the ne	m i cris	<u> </u>
Name of New Registered Agent:							
New Registered Office Address:						20	
		Enter Flo	rida street add	lress	- · · · · · · · · · · · · · · · · · · ·	21 DE	
		City	·	Florida	Ziv Code	<u>'C'</u>	
New Registered Agent's Signature, if changing Register					Zip Code	AH	<u>; </u>
r nevery accept the appointment as registered agen provisions of all statutes relative to the proper and						pr j. L in	n in
being filed to merely reflect a change in the register company has been notified in writing of this change	agencas pr cred office a	ocuvajin in	Chapter in	2, 1 (11,	,, 🛱 i	نا ب س	
	If Chang	ing Registered A	gent, Signatu	re of New Reg	istered Ager		

H amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
	Crystal Creamer	1466 Penny RQ	🗆 Add
	'	1466 Penny RQ CottonDale, FL	Skemove
		32431	□ Change
			□ Add
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Filing Fee: \$25.00